IN THE UNITED STATES BANKRUPTCY COURT FOR THE WESTERN DISTRICT OF PENNSYLVANIA

IN RE:	
Derek J. Rocco Mary Rae Rocco Debtor(
Derek J. Rocco Mary Rae Rocco Movant vs.	
No Respondent(
	AMENDMENT COVER SHEET
Amendment(s)	to the following petition, $list(s)$, $schedule(s)$, or $statement(s)$ are transmitted herewith:
Volum	ary Petition - Specify reason for amendment:
Summ Schedu Schedu Schedu	l Form 6 Schedules (Itemization of Changes Must Be Specified) ary of Schedules ale A - Real Property ale B - Personal Property ale C - Property Claimed as Exempt ale D - Creditors holding Secured Claims Check one: Creditor(s) added
Schedu	NO creditor(s) added Creditor(s) deleted tle E - Creditors Holding Unsecured Priority Claims Check one: Creditor(s) added
Schedu	NO creditor(s) added Creditor(s) deleted sle F - Creditors Holding Unsecured Nonpriority Claims Check one: Creditor(s) added
Schedu	NO creditor(s) added Creditor(s) deleted ale G - Executory Contracts and Unexpired Leases Check one: Creditor(s) added

	NO creditor(s) added	
	Creditor(s) deleted	
	Schedule H - Codebtors	
X	Schedule I - Current Income of Individual	ual Debtor(s)
X		
	_	.,
		at of Intention
	Chapter 11 List of Equity Security Holo	
	Chapter 11 List of Creditors Holding 20	
	Disclosure of Compensation of Attorne	<u> </u>
	Other	·
Docket 1	No. 56 on May 26, 2020.	Respectfully submitted,
<u>Februar</u>	ry 1, 2023	/s/ Kenneth Steidl
DATE		Kenneth Steidl, Esquire
		Attorney for the Debtor(s)
		STEIDL & STEINBERG
		Suite 2830 – Gulf Tower
		707 Grant Street
		Pittsburgh, PA 15219
		(412) 391-8000
		ken.steidl@steidl-steinberg.com
		PA I.D. No. 34965

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

Fill in this informa	ation to identify your case:	
Debtor 1	Derek J. Rocco	_
Debtor 2 (Spouse, if filing)	Mary Rae Rocco	_
United States Ba	ankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA	_
Case number	19-23634	Check if this is:
(If known)		An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106l	MM / DD/ YYYY

Official Form 1061

Schedule I: Your Income

12/15

For Debtor 2 or

For Debtor 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment				
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status*	■ Em	ployed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not	employed	☐ Not employed
	employers.	Occupation	Lead	Systems Engineer	Self-employed
	Include part-time, seasonal, or self-employed work.	Employer's name	Agile	Т	_
	Occupation may include student or homemaker, if it applies.	Employer's address		Kettner Blvd #100 biego, CA 92101	
		How long employed th	ere?	3 months	
				*See Attachment for Add	litional Employment Information

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 15,598.34 0.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 15,598.34 0.00

Official Form 106I Schedule I: Your Income page 1

	otor 1 otor 2	Derek J. Rocco Mary Rae Rocco	_	(Case	number (<i>if l</i>	nowi	n) .	19-23	634			
	Cop	y line 4 here	4.		For	Debtor 1	8.3	4		Debtor 2 filing sp			
E	l iot	all may wall deductions.											
5.		all payroll deductions:	-		Φ.			_	Φ.			_	
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_	3,43		_	\$		0.0		
	5b.	Mandatory contributions for retirement plans	5b		\$_		0.0		\$		0.0		
	5c.	Voluntary contributions for retirement plans	5c		\$_		3.3	_	\$		0.0		
	5d.	Required repayments of retirement fund loans	5d		\$_		0.0	_	\$		0.0		
	5e.	Insurance	5e		\$_ \$	1,24		_	ф—		0.0		
	5f.	Domestic support obligations Union dues	5f.		\$ _		0.0	_	φ		0.0		
	5g. 5h.	Other deductions. Specify:	5g 5h		\$ -		0.0		. ¢—		0.0		
_			_	1.+	· —			0 +			0.0		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	5,30	0.0	8_	\$		0.0	0	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	10,29	8.2	6_	\$		0.0	0	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$		0.0	0	\$	2.4	78.0	0	
	8b.	Interest and dividends	8b		\$_		0.0		\$		0.0		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	; .	\$		0.0		\$		0.0		
	8d.	Unemployment compensation	8d		<u> </u>		0.0	_	\$		0.0		
	8e.	Social Security	8e		\$		0.0	_	\$		0.0		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.0	<u> </u>	\$		0.0		
	8g.	Pension or retirement income	8g		\$		0.0		\$		0.0	0	
	8h.	Other monthly income. Specify: Upper St. Clair School	8h	1.+	\$	16	6.0	0 +	⊦\$		0.0	0	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	16	6.0	0	\$	2,	478.	00	
40	0-1	sulate monthly income. Add the 7 three 0	40	Φ.		0.404.00	1.1	Φ		70.00	•	40	0.40.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ф_	10	0,464.26	 	D	2,47	78.00 =	= \$	12,	942.26
		· .	L				J L						
11.	Inclu othe	the all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•				chedule . 11.			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies								12.	\$	12,	942.26
												oinec	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?							r	nont	hly ir	ncome
		Yes. Explain:											

Case 19-23634-CMB Doc 100 Filed 02/01/23 Entered 02/01/23 16:59:28 Desc Main Document Page 5 of 7

Debtor 1	Derek J. Rocco		
	Mary Rae Rocco	Case number (if known)	19-23634

Official Form B 6l Attachment for Additional Employment Information

Spouse	
Occupation	Field Hockey Coach
Name of Employer	Upper St. Clair School
How long employed	8 Years
Address of Employer	1820 McLaughlin Run Road
	Pittsburgh, PA 15241

Official Form 106l Schedule I: Your Income page 3

EHII	in this informa	tion to identify ve	our occo:			1				
	in this informa	ition to identify yo	our case.							
Deb	otor 1	Derek J. Roo	со			Ch		if this is:		
Deh	otor 2	Many Dag Da						n amended filing	ving postpetition chapter	
	ouse, if filing)	Mary Rae Ro	occo						the following date:	
Unit	ted States Bankı	ruptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA		M	IM / DD / YYYY		
Cas	se number 19	9-23634								
	nown)	7 20004								
0	fficial Fo	rm 106J								
		J: Your	Exper	ises					12/	14
Be info nur	as complete ormation. If member (if know	and accurate as lore space is ne n). Answer evel	possible. eded, atta y question	If two married people ar ch another sheet to this						
Par 1.	Is this a joir	ribe Your House nt case?	inoia							
	☐ No. Go to	line 2.								
	Yes. Doe	es Debtor 2 live	in a separ	ate household?						
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of D	ebto	r 2.		
2.	Do vou have	e dependents?	□ No							
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents				Son			2 Years	■ Yes	
									□ No	
					Son			5 Years	Yes	
					Daughter			8 Years	□ No ■ x	
					Dauginei			o rears	■ Yes □ No	
					Son			9 Years	■ Yes	
3.	expenses o yourself and	penses include f people other to d your depende	han nts? □	No Yes						
Est	timate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						-
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \				Your expe	enses	
4.		or home owners		ses for your residence. I	nclude first mortgage	e 4.	\$		0.00	
		•								
		led in line 4:								
		estate taxes	0,000	'a inqurance		4a.			0.00	
	•	rty, homeowner's maintenance, re		's insurance ipkeep expenses		4b. 4c.			0.00 200.00	
		owner's associat				4d.			0.00	
5.	Additional r	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

Debtor 1 Debtor 2		Derek J. R Mary Rae			Case num	ber (if known)	19-23634
6. l	Jtiliti	ies:					
6	Sa.	Electricity, h	neat, natural gas		6a.	\$	598.00
6	Sb.	Water, sewe	er, garbage collection		6b.	\$	185.00
6	Sc.	Telephone,	cell phone, Internet, satellite, and cable services		6c.	\$	420.00
6	ßd.	Other. Spec	sify:		6d.	\$	0.00
			keeping supplies		7.	\$	1,600.00
8. (Child	Icare and ch	ildren's education costs		8.	\$	200.00
9. (Cloth	ning, laundry	, and dry cleaning		9.	\$	350.00
			oducts and services		10.	\$	350.00
11. I	Medi	cal and dent	al expenses		11.	\$	500.00
		sportation. In ot include car	nclude gas, maintenance, bus or train fare. payments.		12.	\$	550.00
13. E	Ente	rtainment, c	lubs, recreation, newspapers, magazines, and b	ooks	13.	\$	200.00
14. (Char	itable contri	butions and religious donations		14.	\$	80.00
		rance.					
			urance deducted from your pay or included in lines	4 or 20.	45-	•	
		Life insuran			15a.	·	0.00
		Health insu			15b.	·	0.00
		Vehicle insu			15c.	\$	250.00
		Other insura			15d.	\$	0.00
			lude taxes deducted from your pay or included in lir	nes 4 or 20.	16	¢.	007.00
			ebtor's tax withholding 30%		16.	\$ \$	867.00
			etition IRS tax liability payment plan			Φ	300.00
			ase payments: hts for Vehicle 1		17a.	¢	0.00
			nts for Vehicle 2		17a. 17b.	\$	0.00
		Other. Spec			17b.	\$	0.00
		Other. Spec			176. 17d.	*	0.00
		•	f alimony, maintenance, and support that you d	lid not roport as	174.	Ψ	0.00
			our pay on line 5, <i>Schedule I, Your Income</i> (Offic		18.	\$	0.00
			you make to support others who do not live with			\$	0.00
	Spec			•	19.		
20. (Othe	r real proper	ty expenses not included in lines 4 or 5 of this	form or on Schee	dule I: Yo	ur Income.	
2	20a.	Mortgages of	on other property		20a.	\$	0.00
2	20b.	Real estate	taxes		20b.	\$	0.00
2	20c.	Property, ho	omeowner's, or renter's insurance		20c.	\$	0.00
2	20d.	Maintenanc	e, repair, and upkeep expenses		20d.	\$	0.00
2	20e.	Homeowne	r's association or condominium dues		20e.	\$	0.00
21. (Othe	r: Specify:	Pets		21.	+\$	150.00
[Diap	ers				+\$	150.00
- 	دمام:	ulata varir m	anthly avnagae				
		Add lines 4 th	onthly expenses			\$	6 050 00
			(monthly expenses for Debtor 2), if any, from Offici	al Form 106 I-2		\$ ———	6,950.00
				ai i 01111 100 J- Z		·	0.050.00
2	22C. /	Add line 22a	and 22b. The result is your monthly expenses.			\$	6,950.00
23. (Calcu	ulate your m	onthly net income.			<u> </u>	
		-	2 (your combined monthly income) from Schedule I		23a.	\$	12,942.26
			nonthly expenses from line 22c above.		23b.	-\$	6,950.00
			- •			·	-,
2	23c.		ur monthly expenses from your monthly income.		_	_	E 000 00
		The result is	s your monthly net income.		23c.	\$	5,992.26
F	or ex	cample, do you cation to the te	n increase or decrease in your expenses within expect to finish paying for your car loan within the year or orms of your mortgage?	the year after you do you expect your	u file this mortgage լ	form? payment to incre	ase or decrease because of a
	■ No	_	Contain house				
[∃Υe	25	Explain here:				